

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Committee for Maryland's Progress

ADDRESS (number and street)

PO Box 75357

☐ Check if different than previously reported. (ACC)

Washington

DC

20013

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00592683

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election
Report for the:☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

07

2016

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

06

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nicholas Leonardi

Signature of Treasurer

Nicholas Leonardi

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

15

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Committee for Maryland's Progress

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 07 2016 To: M M / D D / Y Y Y Y Y Y
06 30 2016

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016 | | 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 442315.97 | |
| (c) Total Receipts (from Line 19) | 144252.50 | 750257.50 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 586568.47 | 750257.50 |
| 7. Total Disbursements (from Line 31) | 581734.62 | 745423.65 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 4833.85 | 4833.85 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Committee for Maryland's Progress

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 0 | 7 | | 2 | 0 | 1 | 6 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 1 | 6 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 104250.00 | 399250.00 |
| (ii) Unitemized | 0.00 | 5.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ► | 104250.00 | 399255.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 40000.00 | 351000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ► | 144250.00 | 750255.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 2.50 | 2.50 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ► | 144252.50 | 750257.50 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) ► | 144252.50 | 750257.50 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | -25453.39 | 124835.64 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | -25453.39 | 124835.64 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 607188.01 | 620588.01 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 581734.62 | 745423.65 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 581734.62 | 745423.65 |

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 144250.00 | 750255.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 144250.00 | 750255.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | -25453.39 | 124835.64 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 2.50 | 2.50 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | -25455.89 | 124833.14 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Michael Gelman

Mailing Address 11 W Lenox St

City

Chevy Chase

State

MD

Zip Code

20815-4208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gelman, Rosenberg & Freedman CPA

Occupation

Founding Partner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

04 / 12 / 2016

Transaction ID : VR0SAGVT1P9

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Beowulf Energy LLC

Mailing Address 9 Federal St

City

Easton

State

MD

Zip Code

21601-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

04 / 13 / 2016

Transaction ID : VR0SAGVT1V8

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nikos Mouyiaris

Mailing Address 3202 Queens Blvd

City

Long Island City

State

NY

Zip Code

11101-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mana Products

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

04 / 13 / 2016

Transaction ID : VR0SAGVT1R5

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Betsy Krieger

Mailing Address 411 Hawthorne Rd

City State Zip Code
Baltimore MD 21210-2304

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2016

Transaction ID : VR0SAGNEHW2

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Andrew Sandler

Mailing Address Information Requested

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2016

Transaction ID : VR0SAGVT120

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Berndt

Mailing Address 111 Beechdale Rd

City State Zip Code
Baltimore MD 21210-2208

FEC ID number of contributing federal political committee.

C

Name of Employer

Gallagher Evelius & Jones LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 18 / 2016

Transaction ID : VR0SAGNF654

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

8000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Louise T Keely

Mailing Address 3704 N Charles St
Unit 1506

City Baltimore State MD Zip Code 21218-2333

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 20 / 2016

Transaction ID : VR0SAGNF6E5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pennie Abramson

Mailing Address 10513 Stapleford Hall Dr

City Potomac State MD Zip Code 20854-4446

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 21 / 2016

Transaction ID : VR0SAGNF6Q6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Donna Callejon

Mailing Address PO Box 524

City Garrett Park State MD Zip Code 20896-0524

FEC ID number of contributing federal political committee.

C

Name of Employer

Global Giving

Occupation

Chief Business Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

04 / 21 / 2016

Transaction ID : VR0SAGNF772

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. David M Churchill

Mailing Address 2044 Freeland Rd

City

Freeland

State

MD

Zip Code

21053-9585

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brown Advisory

Occupation

CFO/COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : VR0SAGNF7Z2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dennis Mehiel

Mailing Address 7 Renaissance Sq

City

White Plains

State

NY

Zip Code

10601-3039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Four M Investments, LLC

Occupation

Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : VR0SAGNF6X3

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ronald AbramsonMailing Address 1700 K St NW
Ste 300

City

Washington

State

DC

Zip Code

20006-3807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Buchanan Ingersoll & Rooney

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : VR0SAGPEVH9

Amount of Each Receipt this Period

7500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

13500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Marion Ballard

Mailing Address 4413 Chalfont Pl

City
Bethesda

State
MD

Zip Code
20816-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : VR0SAGPEV88

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Diane Feinberg

Mailing Address 5200 Edgemoor Ln

City
Bethesda

State
MD

Zip Code
20814-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : VR0SAGPEWB4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nancy Greenspan

Mailing Address 7201 Glenbrook Rd

City
Bethesda

State
MD

Zip Code
20814-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : VR0SAGPEVS2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Doug Legum

Mailing Address 8207 Maple Ridge Rd

City
Bethesda

State
MD

Zip Code
20814-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Douglas Legum Development

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : VR0SAGPEW15

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gary Michael

Mailing Address 190 Glen Oban Dr

City
Arnold

State
MD

Zip Code
21012-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAI Company

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : VR0SAGPEWE8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. George Tsunis

Mailing Address 246 Piping Rock Rd

City
Locust Valley

State
NY

Zip Code
11560-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chartwell Hotels

Occupation

Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : VR0SAGPEW31

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Mary Pat Fannon

Mailing Address 2375 Boston St

City
Baltimore

State
MD

Zip Code
21224-3657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

State of Maryland

Deputy Legislative Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

06 / 06 / 2016

Transaction ID : VR0SAH44MS7

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

104250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 30

| | | | |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. 1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUNDMailing Address 330 W 42nd St
FI 7City State Zip Code
New York NY 10036-6902FEC ID number of contributing
federal political committee.**C** C00348540

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 14 | / | 2016 |

Transaction ID : VR0SAGVT1Y2

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SIERRA CLUB INDEPENDENT ACTIONMailing Address 85 2nd St
FI 2City State Zip Code
San Francisco CA 94105-3456FEC ID number of contributing
federal political committee.**C** C00483693

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 20 | / | 2016 |

Transaction ID : VR0SAGVT224

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

40000.00

TOTAL This Period (last page this line number only)..... ►

40000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 30

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. H&W Printing

Mailing Address 3616 Oak Ln

City Mount Rainier State MD Zip Code 20712-2128

Purpose of Disbursement
Printing - IE Not Yet Disseminated as of Pre-Primary Report

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2016
Transaction ID : VQZT2A7FMP4

Amount of Each Disbursement this Period

-1507.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Petel & CompanyMailing Address 1101 14th St NW
Ste 1210

City Washington State DC Zip Code 20005-5637

Purpose of Disbursement
Direct Mail Services - IE Not Yet Disseminated as of Pre-Primary Report

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2016
Transaction ID : VQZT2A7FMM8

Amount of Each Disbursement this Period

-65006.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Berger Hirschberg StrategiesMailing Address 1010 Vermont Ave NW
Ste 814

City Washington State DC Zip Code 20005-4957

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2016
Transaction ID : VQZT2A7NC69

Amount of Each Disbursement this Period

600.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-65913.43

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

Committee for Maryland's Progress

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 30

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Blue Engine Message & MediaMailing Address 1140 Connecticut Ave NW
Ste 800

City Washington State DC Zip Code 20036-4010

Purpose of Disbursement
Canvassing Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 21 2016**Transaction ID : VQZT2A81187**

Amount of Each Disbursement this Period

5348.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 26 2016**Transaction ID : VQZT2A810B8**

Amount of Each Disbursement this Period

102.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 29 2016**Transaction ID : VQZT2A7QV00**

Amount of Each Disbursement this Period

938.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6389.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 30

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Blue Engine Message & MediaMailing Address 1140 Connecticut Ave NW
Ste 800

City Washington State DC Zip Code 20036-4010

Purpose of Disbursement
Field Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 05 2016**Transaction ID : VQZT2A8FZR6**

Amount of Each Disbursement this Period

9390.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Evans & Katz, LLC

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013-0357

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 06 2016**Transaction ID : VQZT2A8FZS4**

Amount of Each Disbursement this Period

2855.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Berger Hirschberg StrategiesMailing Address 1010 Vermont Ave NW
Ste 814

City Washington State DC Zip Code 20005-4957

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 10 2016**Transaction ID : VQZT2A8FZX5**

Amount of Each Disbursement this Period

600.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12845.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 30

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

Full Name (Last, First, Middle Initial)

A. Sarah Burris

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 | | | | | | | 2 | 0 | 1 | 6 | | |

Mailing Address 5410 Connecticut Ave NW
Apt 313

City Washington State DC Zip Code 20015-2823

Purpose of Disbursement
Digital Media Consulting Services

Candidate Name

Category/
Type**Transaction ID : VQZT2A8FZV0**

Amount of Each Disbursement this Period

1490.00

☐ Memo Item
Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CT Corporation System

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 | | | | | | | 2 | 0 | 1 | 6 | | |

Mailing Address PO Box 4349

City Carol Stream State IL Zip Code 60197-4349

Purpose of Disbursement
Accounting Services

Candidate Name

Category/
Type**Transaction ID : VQZT2A8FZT2**

Amount of Each Disbursement this Period

365.00

☐ Memo Item
Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 | | | | | | | 2 | 0 | 1 | 6 | | |

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type**Transaction ID : VQZT2A8G009**

Amount of Each Disbursement this Period

420.51

☐ Memo Item
Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2275.51

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 30

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Committee for Maryland's Progress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Brass Tactics Solutions

Nature of Debt (Purpose):

Paid Canvassing Services 3/28-3/31

Mailing Address 1140 Connecticut Ave NW
Ste 800City State Zip Code
Washington DC 20036-4010

Outstanding Balance Beginning This Period

1725.00

Transaction ID : VQXVJ9H9CX9

Amount Incurred This Period

0.00

Payment This Period

1725.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Budget Rent-A-Car

Nature of Debt (Purpose):

Van Rental for Canvassing 3/28-4/26

Mailing Address 101 W Fayette St

City State Zip Code
Baltimore MD 21201-3757

Outstanding Balance Beginning This Period

1319.94

Transaction ID : VQXVJ9H9DS0

Amount Incurred This Period

0.00

Payment This Period

1319.94

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

0.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 30
 FOR LINE 24 OF FORM 3X

| | | | | | |
|---|--|--|---|---|-------------------------------------|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | | | |
| Full Name of Payee Blue Engine Message & Media | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 01 / 2016 | | |
| Mailing Address 1140 Connecticut Ave NW Ste 800 | | | Amount 9526.30 | | |
| City Washington | | State DC | Zip Code 20036-4010 | | Transaction ID : VQZT2A7ATC9 |
| Purpose of Expenditure Canvassing Services for 4/1-4/7 | | Category/Type 004 | | Date of Disbursement or Obligation MM / DD / YYYYYY 04 / 07 / 2016 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee H&W Printing | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 07 / 2016 | | |
| Mailing Address 3616 Oak Ln | | | Amount 1507.34 | | |
| City Mount Rainier | | State MD | Zip Code 20712-2128 | | Transaction ID : VQZT2A79VR8 |
| Purpose of Expenditure Printing | | Category/Type 004 | | Date of Disbursement or Obligation MM / DD / YYYYYY 04 / 07 / 2016 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | 11033.64 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature <u>Nicholas Leonardi</u> | | | Date MM / DD / YYYYYY 07 / 15 / 2016 | | |

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 23 OF 30
FOR LINE 24 OF FORM 3X

| | | | | | |
|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00592683</div> | | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> | | | | | |
| Full Name of Payee Petel & Company | | | <input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> | | |
| Mailing Address 1101 14th St NW Ste 1210 | | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | |
| City State Zip Code Washington DC 20005-5637 | | Transaction ID : VQZT2A74WB7 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> | | | |
| Purpose of Expenditure Direct Mail Services | | Category/ Type <div style="border-bottom: 1px solid black; width: 40px;"></div> | | | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MD</u> | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee Brass Tactics Solutions | | | <input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> | | |
| Mailing Address 1140 Connecticut Ave NW Ste 800 | | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | |
| City State Zip Code Washington DC 20036-4010 | | Transaction ID : VQZT2A81161 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> | | | |
| Purpose of Expenditure Actual Cost for Paid Canvassing Services 3/28-3/31 As Disclosed on 3/30 48-Hour Report | | Category/ Type <div style="border-bottom: 1px solid black; width: 40px;"></div> | | | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MD</u> | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 66731.09 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature <i>Nicholas Leonardi</i> | | | Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> | | |
| | | | [Electronically Filed] | | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 24 OF 30
FOR LINE 24 OF FORM 3X

| | | | |
|---|--|---|--|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | |
| Full Name of Payee Canal Partners Media | | <input type="checkbox"/> Memo Item | |
| Mailing Address 25 Whitlock PI SW Ste 201 | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 12 / 2016 | |
| City State Zip Code Washington DC 20064-0001 | | Amount 160600.00 | |
| Purpose of Expenditure Media Buy | | Category/Type 004 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MD | |
| 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee Petel & Company | | <input type="checkbox"/> Memo Item | |
| Mailing Address 1101 14th St NW Ste 1210 | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 12 / 2016 | |
| City State Zip Code Washington DC 20005-5637 | | Amount 42623.28 | |
| Purpose of Expenditure Direct Mail Services | | Category/Type 004 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MD | |
| 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | 203223.28 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Signature <i>Nicholas Leonardi</i> | | Date MM / DD / YYYYYY 07 / 15 / 2016 | |
| | | [Electronically Filed] | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 25 OF 30
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|---|-------------|---|---|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | | | |
| Full Name of Payee Three Point Media, LLC | | <input type="checkbox"/> Memo Item | |
| Mailing Address 3000 K St NW Ste 320 | | Date of Public Distribution/Dissemination 04 / 12 / 2016 | |
| City Washington | State DC | Zip Code 20007-5109 | Amount 22166.61 |
| Purpose of Expenditure Media Production Services | | Category/ Type 004 | Transaction ID : VQZT2A7GRE7 Date of Disbursement or Obligation 04 / 11 / 2016 |
| Name of Federal Candidate CHRIS VAN HOLLEN | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee Petel & Company | | <input type="checkbox"/> Memo Item | |
| Mailing Address 1101 14th St NW Ste 1210 | | Date of Public Distribution/Dissemination 04 / 15 / 2016 | |
| City Washington | State DC | Zip Code 20005-5637 | Amount 36795.90 |
| Purpose of Expenditure Direct Mail Services | | Category/ Type 004 | Transaction ID : VQZT2A7DW45 Date of Disbursement or Obligation 04 / 12 / 2016 |
| Name of Federal Candidate DONNA FERN EDWARDS | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | 58962.51 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Signature <i>Nicholas Leonardi</i> | | Date 07 / 15 / 2016 <i>[Electronically Filed]</i> | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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|---|--|--|--|---|--|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | | | |
| Full Name of Payee Petel & Company | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 15 / 2016 | | |
| Mailing Address 1101 14th St NW Ste 1210 | | | Amount 36795.90 | | |
| City Washington | | State DC | Zip Code 20005-5637 | | |
| Purpose of Expenditure Direct Mail Services | | Category/Type 004 | | Transaction ID : VQZT2A7DW61 Date of Disbursement or Obligation MM / DD / YYYYYY 04 / 12 / 2016 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee Facebook | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 18 / 2016 | | |
| Mailing Address 1601 Willow Rd | | | Amount 134.74 | | |
| City Menlo Park | | State CA | Zip Code 94025-1452 | | |
| Purpose of Expenditure Actual Cost for Digital Advertising as Disclosed on 4/19 24-Hour Report | | Category/Type 004 | | Transaction ID : VQZT2A7J9Z6 Date of Disbursement or Obligation MM / DD / YYYYYY 04 / 18 / 2016 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | 36930.64 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature _____ Nicholas Leonardi | | | Date MM / DD / YYYYYY 07 / 15 / 2016 | | |

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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|---|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | | |
| Full Name of Payee Canal Partners Media | | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 19 / 2016 | | |
| Mailing Address 25 Whitlock PI SW Ste 201 | | | Amount 105000.00 | | |
| City Washington | | State DC | Zip Code 20064-0001 | | |
| Purpose of Expenditure Media Buy | | Category/Type 004 | | Transaction ID : VQZT2A7JZ65 Date of Disbursement or Obligation MM / DD / YYYY 04 / 19 / 2016 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | |
| Full Name of Payee Petel & Company | | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2016 | | |
| Mailing Address 1101 14th St NW Ste 1210 | | | Amount 65006.09 | | |
| City Washington | | State DC | Zip Code 20005-5637 | | |
| Purpose of Expenditure Direct Mail Services | | Category/Type 004 | | Transaction ID : VQZT2A7JZS5 Date of Disbursement or Obligation MM / DD / YYYY 04 / 20 / 2016 | |
| Name of Federal Candidate DONNA FERN EDWARDS | | | Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD | | |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | 170006.09 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature <i>Nicholas Leonardi</i> | | | Date MM / DD / YYYY 07 / 15 / 2016 | | |
| [Electronically Filed] | | | | | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 28 OF 30
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|---|-------------|---|---|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | |
| Full Name of Payee Blue Engine Message & Media | | <input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 08 / 2016 | |
| Mailing Address 1140 Connecticut Ave NW Ste 800 | | Amount 20000.00 | |
| City Washington | State DC | Zip Code 20036-4010 | Transaction ID : VQZT2A7M6G7 |
| Purpose of Expenditure Actual Cost for Canvassing Services 4/8-4/19 as Disclosed on 4/21 24-Hour Report | | Category/Type 004 | Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2016 |
| Name of Federal Candidate CHRIS VAN HOLLEN | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MD</u> |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee Blue Engine Message & Media | | <input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 20 / 2016 | |
| Mailing Address 1140 Connecticut Ave NW Ste 800 | | Amount 10000.00 | |
| City Washington | State DC | Zip Code 20036-4010 | Transaction ID : VQZT2A7M6H4 |
| Purpose of Expenditure Actual Cost for Canvassing Services 4/20-4/26 as Disclosed on 4/21 24-Hour Report | | Category/Type 004 | Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2016 |
| Name of Federal Candidate CHRIS VAN HOLLEN | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MD</u> |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | 30000.00 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Signature <i>Nicholas Leonardi</i> | | Date MM / DD / YYYY 07 / 15 / 2016 | |
| [Electronically Filed] | | | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 29 OF 30
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|---|--|--|---|--|
| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | | |
| Full Name of Payee H&W Printing | | | <input type="checkbox"/> Memo Item | |
| Mailing Address 3616 Oak Ln | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 22 / 2016 | |
| City Mount Rainier | | State MD | Zip Code 20712-2128 | Amount 3454.54 |
| Purpose of Expenditure Printing | | Category/Type 004 | | Transaction ID : VQZT2A7KQ41 Date of Disbursement or Obligation MM / DD / YYYYYY 04 / 22 / 2016 |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee Canal Partners Media | | | <input type="checkbox"/> Memo Item | |
| Mailing Address 25 Whitlock PI SW Ste 201 | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 23 / 2016 | |
| City Washington | | State DC | Zip Code 20064-0001 | Amount 25000.00 |
| Purpose of Expenditure Media Buy | | Category/Type 004 | | Transaction ID : VQZT2A7MRW0 Date of Disbursement or Obligation MM / DD / YYYYYY 04 / 23 / 2016 |
| Name of Federal Candidate CHRIS VAN HOLLEN | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD |
| Calendar Year-To-Date Per Election for Office Sought 620588.01 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 28454.54 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature Nicholas Leonardi | | | Date MM / DD / YYYYYY 07 / 15 / 2016 | |
| [Electronically Filed] | | | | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 30 OF 30
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| NAME OF COMMITTEE (In Full) Committee for Maryland's Progress | | FEC IDENTIFICATION NUMBER ▼ C C00592683 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | |
| Full Name of Payee Budget Rent-A-Car | | <input type="checkbox"/> Memo Item | |
| Mailing Address 101 W Fayette St | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 03 / 28 / 2016 | |
| City State Zip Code Baltimore MD 21201-3757 | | Amount 1319.94 | |
| Purpose of Expenditure Actual Cost for Van Rental as Disclosed on 3/30 48-Hour Report | | Category/Type 002 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: MD | |
| 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee Budget Rent-A-Car | | <input type="checkbox"/> Memo Item | |
| Mailing Address 101 W Fayette St | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 03 / 28 / 2016 | |
| City State Zip Code Baltimore MD 21201-3757 | | Amount 526.28 | |
| Purpose of Expenditure Actual Cost for Van Rental as Disclosed on 3/30 48-Hour Report | | Category/Type 002 | |
| Name of Federal Candidate CHRIS VAN HOLLEN | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: MD | |
| 620588.01 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | 1846.22 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | | | |
| (c) TOTAL Independent Expenditures.....▶ | | 607188.01 | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Signature Nicholas Leonardi | | Date MM / DD / YYYYYY 07 / 15 / 2016 | |
| | | [Electronically Filed] | |